Print Form

Reset Form

Request for Cancellation of Certificate

File the original with: Public Service Commission of South Carolina Docketing Department Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100 FAX (803) 896-5199	Mail or fax a copy to: S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815
DATE: 12/11/07	
Please consider this a request to cancel my:	
Class C Taxi Certificate	Class A Restricted Certificate
Class C Charter Certificate	
Class C Charter Bus Certificate	
Non-Emergency Certificate	
Class E Household Goods Certificate	
Class E Hazardous Wastes Certificate	
My Certificate Number is $7620 - A$.	
Harvey Williams D (Name of Company)	BA <u>Harvey Williams Taxi & Limo</u> Service (If applicable)
* 999 TimberCLiNe WAY (Street Address)	(Mailing Address if different from Street Address)
* PiNe Ville, SC 29468 (City, State, Zip Code)	$\times \frac{P/NeV/le_i}{SC29468}$ (City, State, Zip Code)
* 843 - 509 - 2396 (Telephone Number)	Namy Williams (Signature)
\pm	(Title) owner, President, etc.